


2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Dec 06, 2005 8:00 A.M.
Secretary of State

DOCUMENT # N36791
1. Entity Name
LEMON BAY WOMAN'S CLUB, INC.



Principal Place of Business
**CORNER COCONUT & MAPLE ST
ENGLEWOOD, FL 34295 US**

Mailing Address
**PO BOX 512
ENGLEWOOD, FL 34224 US**



10282005 REIN-NP CR2E099 (6/04)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip Country

4. FEI Number
59-6154011

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**DICKERSON, ROBERT A.
460 S INDIANA AVE
ENGLEWOOD, FL 34223**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

REINSTATEMENT 05
FL

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE **12/05/05**

Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$236.25
After January 1, 2006, Fee will be \$297.50

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2TVP PFEIFFER, DORIS 7281 BARGELLO ST ENGLEWOOD, FL 34224 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER DORIS PFEIFFER 7281 BARGELLO ST ENGLEWOOD, FL 34224 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CROCKER, MARY 13 JAMESTOWN AVE ENGLEWOOD, FL 34223 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	RECORDING SECT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 900061732819 11/28/05--01061--024 **245.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	RSD DINATALE, MERIDITH 237 PARK FOREST BLVD SARASOTA, FL 34243 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	2ND VICE PRESIDENT DINATALE, MERIDITH 237 PARK FOREST BLVD. ENGLEWOOD, FL 34223 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT FENOLIO, GLORIA 413 PINE HOLLOW CIR ENGLEWOOD, FL 34223 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	1ST VICE PRESIDENT SUSAN BURGESS 1305 BLUE HERON ENGLEWOOD, FL 34224 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1VPD FOECKING, LYNN 228 MARINER LANE ENGLEWOOD, FL 34224 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	RECORDING SECT MARGARET FOREMAN 272 ROTONDA BLVD., N ROTONDA W. FL 33947 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TFS MCLEOD, MARY ELLEN 6746 GASPARILLA PINES #80 ENGLEWOOD, FL 34224 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	FINANCIAL SECT. MARY ELLEN MCLEOD 6746 GASPARILLA PINES #80 ENGLEWOOD, FL 34224 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Doris J. Pfeiffer **DORIS J. PFEIFFER** 11/19/05 941-475-1844

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #